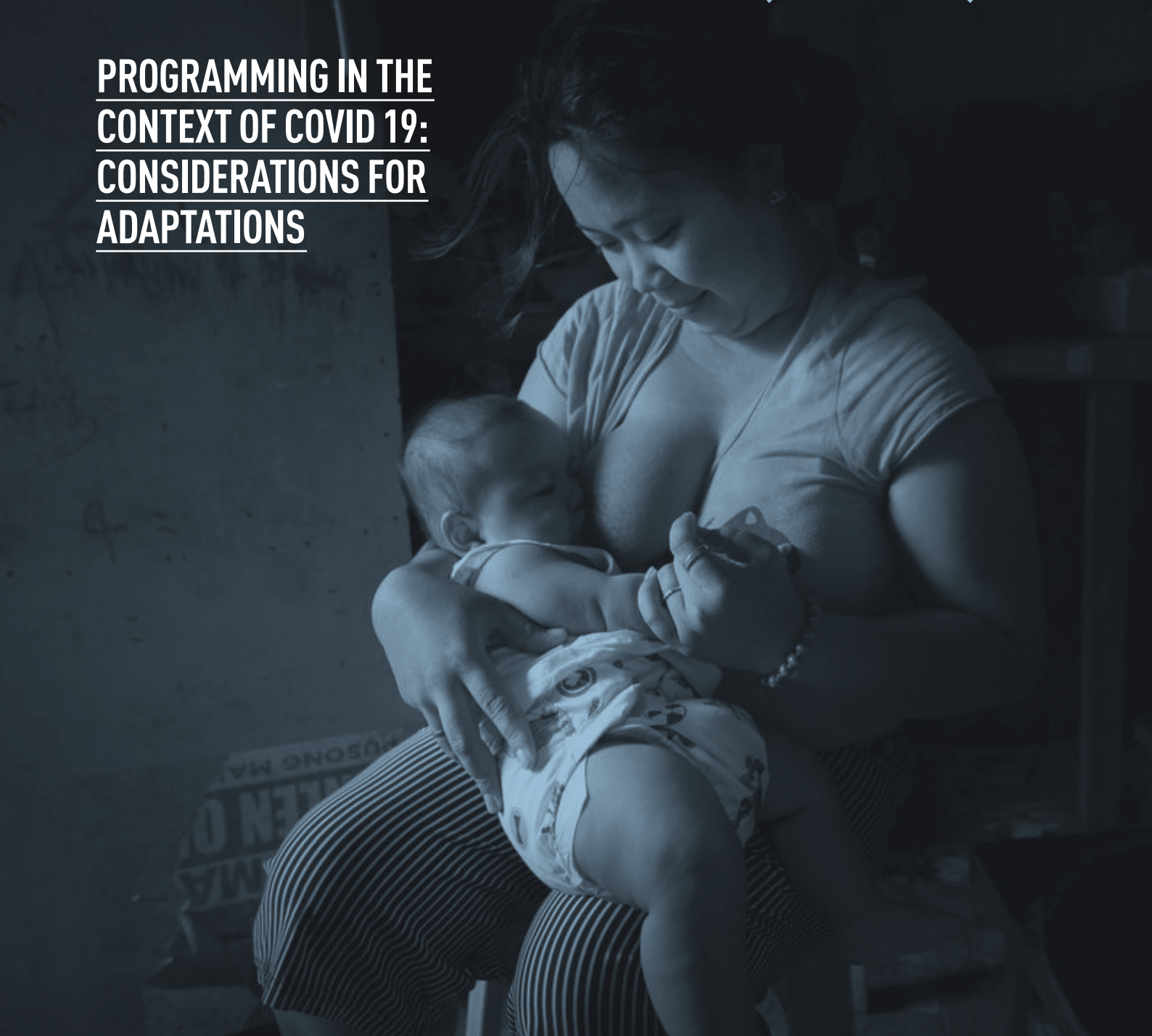


NOVEMBER 2020

INFANT & YOUNG CHILD FEEDING

IN EMERGENCIES (IYCF-E)

PROGRAMMING IN THE
CONTEXT OF COVID 19:
CONSIDERATIONS FOR
ADAPTATIONS



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Philippines

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INTRODUCTION

A black and white photograph of a woman wearing a headscarf, holding a baby. The woman is looking down at the baby with a gentle expression. The baby is wearing a patterned shirt and is looking up at the woman. The background is slightly blurred, showing what appears to be a window or a doorway.

The COVID-19 pandemic is an unprecedented global emergency with 216 countries affected, more than 19 million confirmed cases and more than 900,000 deaths as of September 2020.ⁱ The United Nations has declared the pandemic a health and human crisis that is threatening the food and nutrition security of millions of people living across the world – more so for those that were already living in humanitarian and fragile environments.ⁱⁱ According to WFP’s Hunger Map 2020; If current trends continue, the number of hungry people will reach 840 million by 2030.ⁱⁱⁱ

The disruption and/or reduction of key maternal and child health and nutrition services in low and middle-income countries (LMIC) is expected to have a disastrous effect on maternal and child morbidity and mortality. A recent model provides for three potential scenarios where the disruption in coverage and access to services was factored in. The most conservative estimate suggests that a 9.8-18.5% reduction in coverage of essential maternal and child health and nutrition services and a 10% increase in wasting over a six-month period may lead to an additional 253,500 child deaths and 12,200 additional maternal deaths.^{iv} A model using the Alive & Thrive cost of not breastfeeding tool^v estimated the impact of COVID-19 on breastfeeding prevalence, and found that the effect of small (5%) up to severe (50%) relative reductions in the prevalence of breastfeeding would result in 16,469 (small reduction), and up to 138,398 (severe reduction) child deaths across 129 LMICs over a one-year period.^{vi} COVID-19 is also likely to have a serious implication on the food systems and food security situation, affecting households’ access to nutritious food and compromising the quantity and quality of foods offered to children in the complementary feeding stage.

During the COVID-19 pandemic, reductions in breastfeeding prevalence will plausibly occur due to limitations in the provision and use of health services and disruptions to the enabling environment. Some of the other individual and social factors that affect breastfeeding prevalence’s include increased fear, myths, and misinformation about breastfeeding and complementary feeding practice in this context, including among service providers, that have shown in some contexts low confidence in offering infant and young child feeding (IYCF) services. Fears are also exacerbated in some contexts by facility-based policies and practices that have not considered the WHO and UNICEF IYCF recommendations and standards in the context of COVID-19.^{vii} Additionally, with the information overload in some contexts, evolving evidence, publications, social media, and other communications channels can spread misinformation and confusion.

Disruption in IYCF services may also be linked to national or sub-national level requirements for disease prevention. These include the general effort to enforce social distancing (a minimum of 1-metre), using remote modalities and limited person-to-person contact, limit group gatherings of any sort with increased recommended respiratory hygiene practices with enforcement of face covering for community agents and other health and nutrition workers. Considering these elements, implementing IYCF programmes is needed but with some adaptations.

This tool is developed to assist programme implementers in determining scale up/scale down of IYCF/IYCF-E activities in response to national or sub-national guidelines related to COVID-19 on:

- 1. Mobility of staff, community agents and/or population**
- 2. Restrictions or limitations related to meetings, trainings, and gatherings**
- 3. Other related measures**

This tool is not meant to illustrate the “How” part: further guidance on programmatic adaptations and on reducing viral transmission while ensuring the effective delivery of different IYCF/IYCF-E services and activities can be found in the resources section on page 15.

This IYCF-E programme adaptation tool gives generic guidance and should be used in alignment with national and/or sub-national guidance developed for the COVID-19 context.



Myanmar (Burma)
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OBJECTIVES

- 1** ILLUSTRATE KEY CONSIDERATIONS FOR ADAPTATION OF BASIC IYCF/IYCF-E INTERVENTIONS IN THE CONTEXT OF COVID-19
- 2** PROVIDE A TOOL TO GUIDE AND INFORM IYCF/IYCF-E PROGRAMMING ADAPTATION MEASURES IN THE CONTEXT OF COVID-19
- 3** HELP HEALTH AND NUTRITION MANAGERS IN IDENTIFYING WAYS TO CONTINUE THEIR IYCF/IYCF-E ACTIONS IN THE CONTEXT OF COVID-19

SETTINGS

FACILITY
COMMUNITY (INCLUDING HOUSEHOLD VISITS)

BASIC IYCF INTERVENTIONS CONSIDERED FOR THIS DOCUMENT

- **Individual Counselling:**
A conversation between a counsellor and mother/caregiver, based on a three-step process that includes assessment, analysis and action to help the caregiver decide on what is best for herself and her child in their situation. Counselling is different from education and messaging.^{viii}
- **Group support (mother, fathers, others, care groups):**
 - **Mother-to-mother support group:** Is a meeting where pregnant women and mothers with young children, as well as other people with similar interests, come together in a safe place to exchange ideas, share experiences, give and receive information, and at the same time, offer and receive support in breastfeeding, child rearing, and women's health.^{ix}
 - **Father-to-father support group:** Is similar to mother-to-mother support groups except the participants are fathers.^x
 - **Care groups:** A Care Group is a group of 10-15 volunteer, community-based health educators who regularly meet together with NGO project staff for training and supervision.^{xi}
 - **Group education:** In the context of IYCF, education encompasses activities designed to enhance the ability and motivation of caregivers to voluntarily adopt nutrition-related behaviours conducive to health and wellbeing.
 - **Group Counselling**
- **Safe spaces (Mother Baby Area (MBA), Baby Friendly Spaces, IYCF/Breastfeeding Corners)**
 - **Mother Baby Area:** A dedicated (stand-alone/separate) space in the community for breastfeeding, skilled IYCF counselling, caring for young children, and caretakers' psychosocial support.
 - **Baby Friendly Spaces:** Baby Friendly Spaces is a model of intervention for a holistic programme to support pregnant and lactating women and their children in emergency situations.^{xii}
 - **IYCF/Breastfeeding Corners:** A private space, integrated into other services, where women can privately breastfeed and receive basic frontline feeding support/skilled IYCF support.
- **IYCF message dissemination:**
Sharing/spreading key IYCF messages through different community channels.
- **Code monitoring:**
Activities including the monitoring and reporting of any violations related to the International Code of Marketing of Breastmilk Substitutes.
- **Other activities (e.g. screening, stimulation activities):**
Mother baby areas can be a useful entry point to deliver and integrate other activities including nutrition screening, mental health and psychosocial support (MHPSS), and integrating simple early stimulation, learning and play activities.

INFECTION PREVENTION AND CONTROL (IPC) MEASURES

(Applies to all in-person activities mentioned in the below table)

General recommended actions to limit virus transmission for all types of IYCF/IYCF-E programme in the context of COVID-19:^{xiii,xiv}**● Hand washing:**

Wash hands frequently with water and soap for 20 seconds or clean hands with hand sanitiser.

● Covering nose and mouth:

Cover your mouth and nose with your bent elbow or tissue when you cough or sneeze. Dispose of the used tissue immediately in an appropriate waste basket. Wear masks in enclosed spaces (follow national guidelines).^{xv}

● Distancing:

maintain at least 1 metre from other people - Exception being the mother and child dyad. (Close contact and early, exclusive breastfeeding helps a baby to thrive, and the unparalleled benefits of breastfeeding outweigh any potential risk of transmission.)^{xvi}

IYCF RECOMMENDATIONS IN THE CONTEXT OF COVID-19**● Mothers can continue breastfeeding as recommended**

- Early initiation of breastfeeding immediately after birth (within 1 hour)
- Exclusive breastfeeding up to 6 months of age, or beyond
- Continued breastfeeding up to 2 years and beyond
- Complementary feeding: Timely introduction of age-appropriate, adequate, safe, and properly fed complementary foods starting from 6 months.

● COVID-19 recommendations for infant feeding when COVID-19 mother is suspected/confirmed for the mother:

- Breastfeeding women should not be separated from their newborns, as there is no evidence to show that respiratory viruses can be transmitted through breast milk.
- Symptomatic mothers well enough to breastfeed should wear a mask if available and ensure the following are followed:
 - a. Frequent hand washing: wash hands with soap and clean water before and after contact with the child (including feeding).
 - b. Frequent clean/disinfect contaminated surfaces: Clean frequently touched surfaces (such as tables, chairs, light switches, phones, remote controls, door handles, toilets, sinks etc.) regularly with soap and water or household disinfectant.
 - c. Cover nose and mouth with your bent elbow or tissue when coughing or sneezing and when in contact with the child. Dispose of the used tissue immediately in an appropriate waste basket.
 - d. Avoid touching eyes, nose, and mouth (own and baby's).
 - e. Maintain at least 1 metre from other people - Exception being the mother and child dyad.
 - f. If a mother is too ill to breastfeed, she should be encouraged to express milk that can be given to the child via a clean cup and/or spoon while wearing a mask, washing hands before and after contact with the child, and cleaning/disinfecting contaminated surfaces.

● Alternatives to breast feeding:

If the mother not able to breastfeed or express breast milk, look for other safer alternatives for the newborn/infant that are in line with national policies, culturally and socially accepted by the mother and family. Wet-nursing (another woman breastfeeds the child), donor human milk if available or infant formula milk (with measures to ensure that it is feasible, correctly prepared, safe and sustainable) are the preferred options, where culturally and socially acceptable (see the WHO decision tree for breastfeeding in context of COVID-19^{xvii}). Infant formula is the option of last resort when the former options have been exhausted. Donations of infant formula milks should not be sought or accepted, in accordance with The International Code of the Marketing of Breast-milk Substitutes.

● Complementary Feeding

of nutritionally adequate and safe foods should be introduced at age 6-months, together with continued breastfeeding up to age 2-years or beyond.



Myanmar (Burma)
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GENERAL CONSIDERATIONS AND HOW TO USE THE TOOL (FOR ALL SETTINGS)

- 1 **SCENARIO BASED**
- 2 **RELY ON NATIONAL/SUB-NATIONAL GUIDELINES**
- 3 **ALL ACTIVITIES THAT CAN STILL BE CONTACTED IN PERSON AND WHERE REQUIRED, ENSURE:**
 - a. Social distancing (maintain at least 1 meter distance from other people)
 - b. Frequent hand washing
 - Establish handwashing area with soap and make sure all visitors wash hands with water and soap for 20 seconds or clean hands with hand sanitiser before entering to IYCF/IYCF-E centres
 - c. Cover nose and mouth (all staff and participants, based on the national protocol)
 - d. Stay home when not feeling well (facilitators, staff and mothers/caretakers)
- 4 **ENSURE HEALTH AND NUTRITION WORKERS AT THE FACILITY LEVEL COMPLY WITH NATIONAL/SUB-NATIONAL AND/OR WHO/UNICEF IPC REQUIREMENTS**
- 5 **FOLLOW WHO/UNICEF GUIDANCE IN RELATION TO INFANT FEEDING WHEN COVID-19 IS SUSPECTED OR CONFIRMED AND/OR NATIONAL/SUB-NATIONAL RELEVANT GUIDANCE**
- 6 **ENSURE CHWS/STAFF COMPLY WITH NATIONAL/SUB-NATIONAL REQUIREMENTS**

SPECIFIC CONSIDERATIONS FOR EACH IYCF ACTIVITY BY SETTING, BASED ON DIFFERENT SCENARIOS

- **No IYCF/IYCF-E service in person, if possible only remote provision**
- **Some face-to-face service with precautions and/or remote**
- **Full face-to-face service with precautions and remote as needed**

Definition of terms included in the following table

- **Trained IYCF staff:** Includes trained health and nutrition workers, IYCF counsellors, community health workers (CHWs), lead mothers/fathers, etc.
- **Remote IYCF counselling:** Includes counselling via phone and other online applications remotely, according to feasibility.
- **Support group meeting:** Normally 12-15 people participate in support group meetings, we recommend reducing this number based on the local context to ensure recommended physical distancing (at least 1 metre).
- **Small number for IYCF message dissemination:** Normally 12-15 people participated, we recommend reducing this number based on the local context to ensure recommended physical distancing (at least 1 meter).
- **Remote IYCF message dissemination:** This includes dissemination of IYCF messages using mass media like TV and radio, mobile text messaging or messaging via other online application platforms such as Facebook and WhatsApp, or using a megaphone to disseminate IYCF messages in the community.
- **Lead mothers:** An identified mother or grandmother in the community who has respect and can provide messages and support to breastfeeding mothers.

COMMUNITY (INCLUDING HOUSEHOLD VISITS)

ACTION/ INTERVENTIONS	NO MOVEMENT/ NO ACCESS FOR STAFF/ CHWS/VOLUNTEERS	LIMITED MOVEMENT/ ACCESS FOR STAFF/ CHWS/VOLUNTEERS	NO GATHERINGS/ MEETINGS WITH 5 OR MORE PEOPLE	NO RESTRICTIONS IN PLACE REGARDING ACCESS AND MOVEMENT OF STAFF/CHWS/ VOLUNTEERS
IYCF individual counselling	Yes, remote	Yes, remote and/or in person by trained IYCF counsellors	Yes, remote and/or in person by trained IYCF counsellors	Yes, in person by trained IYCF counsellors
IYCF group education and counselling sessions	No group meeting, remote by trained IYCF counsellors	Yes, remote and/or in person by trained IYCF counsellors with small number	Yes, remote and/or in person by trained IYCF counsellors with < 5 people	Yes, in person by trained IYCF counsellors
IYCF support groups	No group meeting; lead mothers may only support individual members (remotely supported if feasible)	Yes, by lead mothers only remotely supported and/or in person with small number	Yes, in person with < 5 people	Yes, in person
IYCF message dissemination	Yes, remote or via community channels	Yes, remote and/or in person by trained IYCF community agents	Yes, remote and/or in person by trained community-based IYCF counsellor	Yes, remote and/or in person by trained community-based IYCF counsellor
Mother Baby Areas/Baby Friendly Spaces^{xix}	Yes, for some activities that could be done remotely (detailed activities in the MBA highlighted below)	Yes, in person by trained community and/or facility-based IYCF counsellor	Yes, limited numbers at one time	Yes, in person by trained community and/or facility-based IYCF counsellor
Code monitoring activities	Yes, remote by trained IYCF community agents	Yes, remote and/or in person	Yes, remote and/or in person	Yes, remote and/or in person

- No IYCF/IYCF-E service in person, if possible only remote provision
- Some face-to-face service with precautions and/or remote
- Full face-to-face service with precautions and remote as needed

HEALTH FACILITY/NUTRITION CENTRES/FACILITIES

ACTION/ INTERVENTIONS	NO MOVEMENT/ NO ACCESS FOR STAFF/ CHWS/VOLUNTEERS	LIMITED MOVEMENT/ ACCESS FOR STAFF/ CHWS/VOLUNTEERS	NO GATHERINGS/ MEETINGS WITH 5 OR MORE PEOPLE	NO RESTRICTIONS IN PLACE REGARDING ACCESS AND MOVEMENT OF STAFF/CHWS/ VOLUNTEERS
IYCF individual counselling	Yes, remote	Yes, remote and/or in person	Yes, remote and/or in person	Yes, in person
IYCF group education and counselling sessions	No group meeting, remote by trained IYCF counsellors	Yes, remote and/or in person by trained IYCF counsellors with small number	Yes, remote and/or in person by trained IYCF counsellors with < 5 people	Yes, in person by trained IYCF counsellors
IYCF mother/father support groups				
IYCF message dissemination	Yes, remote	Yes, remote and/or in person with small number	Yes, in person < 5 people at a time	Yes, in person, small number
Mother Baby Areas/Baby Friendly Spaces				
IYCF Corner	Emergency IYCF service only	Yes, 1 pregnant women or mother at a time	Yes, 1 pregnant women or mother at a time	Yes, 1 pregnant women or mother at a time
Code monitoring activities	Yes, remote and/or in person	Yes, remote and/or in person	Yes, remote and/or in person	Yes, remote and/or in person

- No IYCF/IYCF-E service in person, if possible only remote provision
- Some face-to-face service with precautions and/or remote
- Full face-to-face service with precautions and remote as needed

MOTHER BABY AREA/BABY FRIENDLY SPACE

ACTION/ INTERVENTIONS	NO MOVEMENT/ NO ACCESS FOR STAFF/ CHWS/VOLUNTEERS	LIMITED MOVEMENT/ ACCESS FOR STAFF/ CHWS/VOLUNTEERS	NO GATHERINGS/ MEETINGS WITH 5 OR MORE PEOPLE	NO RESTRICTIONS IN PLACE REGARDING ACCESS AND MOVEMENT OF STAFF/CHWS/ VOLUNTEERS
IYCF individual counselling	Yes, remote (incl. other integrated components like ECD and MHPSS)	Yes, remote and/or in person	Yes, remote and/or in person	Yes, in person
IYCF group education and counselling sessions	No group meeting, remote by trained IYCF counsellors	Yes, remote and/or in person by trained IYCF counsellors with small number	Yes, remote and/or in person by trained IYCF counsellors with < 5 people	Yes, in person by trained IYCF counsellors
IYCF mother/father support groups meetings/care groups				
IYCF message dissemination	Yes, remote	Yes, in person with limited numbers	Yes, in person < 5 people at a time	Yes, in person
Other activities related to the use of the space (e.g. screening, stimulation activities)	No	Yes, in person with limited numbers	Yes, in person < 5 people at a time	Yes, in person
Code monitoring and reporting activities	Yes, remote and/or in person	Yes, remote and/or in person	Yes, remote and/or in person	Yes, remote and/or in person

- No IYCF/IYCF-E service in person, if possible only remote provision
- Some face-to-face service with precautions and/or remote
- Full face-to-face service with precautions and remote as needed

WHAT CAN IYCF STAFF DO BASED ON DIFFERENT SCENARIOS?

ACTION/ INTERVENTIONS THAT CAN BE DONE BY IYCF STAFF	NO MOVEMENT/ NO ACCESS FOR STAFF/ CHWS/VOLUNTEERS	LIMITED MOVEMENT/ ACCESS FOR STAFF/ CHWS/VOLUNTEERS	NO GATHERINGS/ MEETINGS WITH 5 OR MORE PEOPLE	NO RESTRICTIONS IN PLACE REGARDING ACCESS AND MOVEMENT OF STAFF/CHWS/ VOLUNTEERS
Health and/or Nutrition Worker and IYCF counsellor	<ul style="list-style-type: none"> Remote IYCF individual counselling Remote dissemination of IYCF messages Emergency IYCF service to address breastfeeding difficulties like breast conditions, etc. 	<ul style="list-style-type: none"> Remote and/or in person IYCF individual counselling Remote and/or in person dissemination of IYCF messages Support IYCF services in the IYCF corner/ MBA (one mother/ caretaker at a time) 	<ul style="list-style-type: none"> In person IYCF individual counselling Support group meeting (small number of participants) In person dissemination of IYCF messages Support IYCF services in the IYCF corner/ MBA (one mother/ caretaker at a time) 	<ul style="list-style-type: none"> In person IYCF individual counselling Support group meeting (small number of participants) In person dissemination of IYCF messages Support IYCF services in the IYCF corner/ MBA (one mother/ caretaker at a time)
Community health worker/ community health volunteer/ community nutrition volunteer	<ul style="list-style-type: none"> Remote IYCF individual counselling Remote dissemination of IYCF messages 	<ul style="list-style-type: none"> Remote and/or in person IYCF individual counselling Remote and/or in person dissemination of IYCF messages Support IYCF services in the MBA (one mother/ caretaker at a time) Simple rapid assessment for new mothers and refer cases for remote/or in person support. 	<ul style="list-style-type: none"> In person IYCF individual counselling Support group meeting (small number of participants) In person dissemination of IYCF messages Support IYCF services in the IYCF corner/ MBA (one mother/ caretaker at a time) 	<ul style="list-style-type: none"> In person IYCF individual counselling Support group meeting (small number of participants) In person dissemination of IYCF messages Support IYCF services in the IYCF corner/ MBA (one mother/ caretaker at a time)
Lead mothers/ fathers	<ul style="list-style-type: none"> Remote IYCF individual counselling Remote dissemination of IYCF messages 	<ul style="list-style-type: none"> Remote and/or in person IYCF individual counselling Remote and/or in person dissemination of IYCF messages Support IYCF services in the MBA (one mother/caretaker at a time) 	<ul style="list-style-type: none"> In person IYCF individual counselling Support group meeting (small number of participants) In person dissemination of IYCF messages Support IYCF services in the MBA (one mother/caretaker at a time) 	<ul style="list-style-type: none"> In person IYCF individual counselling Support group meeting (small number of participants) In person dissemination of IYCF messages Support IYCF services in the MBA (one mother/caretaker at a time)
Mother/ Father (members of groups)	<ul style="list-style-type: none"> Remote dissemination of IYCF messages 	<ul style="list-style-type: none"> Remote and/or in person dissemination of IYCF messages Attend support group meetings 	<ul style="list-style-type: none"> In person dissemination of IYCF messages Attend support group meetings 	<ul style="list-style-type: none"> In person dissemination of IYCF messages Attend support group meetings
Community	<ul style="list-style-type: none"> IYCF messages via mass media 	<ul style="list-style-type: none"> Follow IYCF messages via mass media 	<ul style="list-style-type: none"> Follow IYCF messages via mass media Attend IYCF message dissemination meetings (in small number) 	<ul style="list-style-type: none"> Follow IYCF messages via mass media Attend IYCF message dissemination meetings (in small number)

RESOURCES FOR IYCF/IYCF-E IN THE CONTEXT OF COVID-19

- 1 Infant and Young Child Feeding in the Context of COVID-19 Brief No. 2 , March 30, 2020 by UNICEF, GNC and GTAM:
<https://www.unicef.org/documents/infant-and-young-child-feeding-context-covid-19>
- 2 Frequently asked questions: Breastfeeding and COVID-19 by WHO:
<https://www.who.int/publications/m/item/frequently-asked-questions-breastfeeding-and-covid-19>
- 3 Clinical Management of COVID 19 by WHO: <https://www.who.int/publications/i/item/clinical-management-of-covid-19>
- 4 Infant and Young Child Feeding Counselling Cards When COVID-19 is Suspected or Confirmed by UNICEF and USAID Advancing Nutrition:
<https://www.advancingnutrition.org/what-we-do/social-and-behavior-change/iycf-recommendations-covid-19>
- 5 Infant Feeding in the Context of COVID-19: FAQ for the front-line health and nutrition workers by SafelyFed Canada & Save the Children:
<https://resourcecentre.savethechildren.net/library/infant-feeding-context-covid-19-faq-front-line-health-and-nutrition-workers>
- 6 Key advocacy messages on breastfeeding and COVID-19 by Global Breastfeeding Collective:
<https://www.globalbreastfeedingcollective.org/reports/key-advocacy-messages-breastfeeding-and-covid-19>
7. Guidance and Tools for programmatic adaptations <https://gtam.nutritioncluster.net/node/34>
- 8 Technical support on nutrition programmatic adaptations in the context of COVID-19
<https://docs.google.com/document/d/1balU0yYwhzxlMMSkUUIUa0leoHoTVhq7lDdqZVQris/edit>
- 9 Guidance on financial and in-kind contributions from the food and beverage industry in emergency context
<https://www.nutritioncluster.net/node/19406>
- 10 Infant and Young Child Feeding in Emergencies, Toolkit with COVID 19 relevant resources by Save the Children
<https://resourcecentre.savethechildren.net/library/infant-and-young-child-feeding-emergencies-iycf-e-toolkit-rapid-start-emergency-nutrition>

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- iii WFP. Hunger Map 2020: <https://www.wfp.org/publications/hunger-map-2020>
- iv Robertson T. et al (2020) 'Early estimates of the indirect effects of the COVID-19 pandemic on maternal and child mortality in low-income and middle-income countries: a modelling study', *The Lancet Global Health*, published online on 12 May 2020: [https://doi.org/10.1016/S2214-109X\(20\)30229-1](https://doi.org/10.1016/S2214-109X(20)30229-1). The detailed results by countries and regions are available in a dashboard format at <https://data.unicef.org/topic/child-survival/covid-19/> with other resources, data and analysis on COVID-19 and child mortality. While the study covers both maternal and child mortality, this brief focuses on the results of the analysis on under-5 mortality.
- v UNICEF. Alive & Thrive, The Global Cost of Not Breastfeeding https://www.aliveandthrive.org/wp-content/uploads/2019/08/Global-Cost-of-Not-Breastfeeding_V5.pdf
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- xiv Infant and Young Child Feeding Counselling Cards When COVID-19 is Suspected or Confirmed, by UNICEF and USAID Advancing Nutrition: <https://www.advancingnutrition.org/what-we-do/social-and-behavior-change/iycf-recommendations-covid-19>
- xv WHO advice on the use of masks in the context of COVID-19: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/when-and-how-to-use-masks>
- xvi Global Breastfeeding Collective. Key advocacy messages on breastfeeding and COVID-19: <https://www.globalbreastfeedingcollective.org/reports/key-advocacy-messages-breastfeeding-and-covid-19>
- xvii WHO. Frequently Asked Questions: Breastfeeding and COVID-19: For health care workers: https://www.who.int/docs/default-source/maternal-health/faqs-breastfeeding-and-covid-19.pdf?sfvrsn=d839e6c0_1
- xviii StC How to conduct IYCF counselling (to be released soon)
- xix Mother Baby Areas and Baby Friendly Spaces during COVID19 (to be released soon)

**INFANT & YOUNG
CHILD FEEDING
IN EMERGENCIES (IYCF-E)**



Technical
Rapid
Response
Team



Save the Children
